

NEW YORK STATE DEPARTMENT OF CORRECTIONS AND COMMUNITY SUPERVISION

Sample Letter for Notice of Acceptance or Deficiency

Department Letter Head

(see Directive #0008, "Use of Department Stationery & Business Cards")

DATE

NAME

TITLE

COMPANY

STREET ADDRESS

CITY, STATE ZIP

Re: CONTRACT NUMBER
CONTRACT NAME
Amount:

Dear NAME:

I have received your Utilization Plan for the above-referenced project. Upon review, the SDVOB firm(s) listed on **Appendix X** are approved for utilization. Based on your submittal, your firm has a shortfall of % (\$) *SDVOB participation*. The contractually required M/SDVOB participation for this contract 6%.

According to NY State Executive Law Article 17-B, all contractors are required to make a good faith effort to solicit SDVOB participation on DOCCS' funded contracts. It appears that **COMPANY NAME** has not met those requirements. For assistance in identifying NYS Certified SDVOB sub-contractors/suppliers, please proceed to the OGS website: <https://online.ogs.ny.gov/SDVOB/search>. I am requesting that you submit a revised Utilization Plan along with any good faith efforts by close of business **DAY AND DATE**.

I have attached additional vendor information in the industry that may be of assistance to you in fulfilling the SDVOB goals of this contract.

If you have any questions, you may contact me at (xxx) xxx-xxxx ext. xxxx.

Sincerely,